

LL  
02/24/01

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			01/24/01
FORMALITY REVIEW	MD	589	02/27/01
RESPONSE FORMALITY REVIEW	MD	589	04/30/01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim		Date	Claim		Date	Claim		Date
Final	Original		Final	Original		Final	Original	
1	6-202		51			101		
2	4-1-03		52			102		
3			53			103		
4			54			104		
5			55			105		
6			56			106		
7			57			107		
8			58			108		
9			59			109		
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12			62			112		
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48			98			148		
49			99			149		
50			100			150		

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